

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLI  
(Other instructions  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1.  OIL WELL  GAS WELL  OTHER Salt Water Disposal

2. NAME OF OPERATOR  
Marathon Oil Company

3. ADDRESS OF OPERATOR  
P. O. Box 2409, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
  
1905' FSL & 810' FWL

14. PERMIT NO. \_\_\_\_\_

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
DF 3665'

5. LEASE DESIGNATION AND SERIAL NO.  
NM-02127-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME  
Lea Unit

8. FARM OR LEASE NAME  
Lea Unit

9. WELL NO.  
1 SWD

10. FIELD AND POOL, OR WINDUOL  
Lea Unit Area

11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA  
Sec. 12-20S-34E

12. COUNTY OR PARISH  
Lea

13. STATE  
New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO:                      |   | SUBSEQUENT REPORT OF:                          |  |
|--|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>        | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>    | FRACTURE TREATMENT <input type="checkbox"/>    | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input checked="" type="checkbox"/>  | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/>    |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         | (Other) <input type="checkbox"/>               |  |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

- Rigged up pulling unit. Pulled and fished 3 1/2" tubing from July 1 to July 17, 1977.
- Found well unfit for continued use for salt water disposal purposes.
- Received verbal permission from Mr. Arthur R. Brown July 11, 1977, to abandon well by cementing from total depth of 4137' to surface.
- Intend to plug well by cementing from total depth of 4137' to surface.

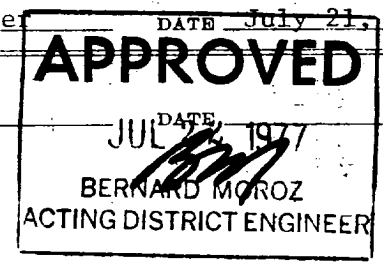
18. I hereby certify that the foregoing is true and correct

SIGNED *B. P. [Signature]* TITLE Production Engineer DATE July 21, 1977

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:



\*See Instructions on Reverse Side